SEP 2-6-2013

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Monica Wolf Vernon

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below. Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	han the filer's current employme mount of any honoraria; list only honoraria; list only ament programs, and benefits re	nt by the U.S. Governme the source for other sponsories ceived under the Social	ant) totalling \$200 or ouse earned income Security Act.
Source (include date of receipt for honoraria)	Type	Amount	ount
Ocales (Ficiale date of receipt for Horiotalia)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Framples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
City of Codar Ravids, Itoms	SMORY	#12,549	#16,869
Vernon Research From O. Inc.	-		
Celler Rapids town	Salary	130,500	\$20,838
Simmons Pervine Kurer Bergman, Pla	,	*	•
Celar Rapids, Lowa	Spoyse salary	11/1	NIA
	7	1	
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	

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J-1	Liberty Bank - Account	Stock - Banking	Bank Jown Taccount	OWA - OCCOUNT	Stock - Market Research	JT 1st Bank of Paducah, KY accounts	Examples:	SP Mega Corp. Stock	income during the reporting period); any deposits total ing \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
X	X	×	X	×	*	×	Indefinite	X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000*		A BB C C C C C C C C C C C C C C C C C C	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	reporting year. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	ВLОСК В
X	X	×	×	×	×	×	Royalises	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm In-	come		during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	check all columns that do not retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k)	Type of Income	вгоск с
X	X	×	× ×	×	×	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Civer \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$5,001 - \$15,000 \$50,001 - \$15,000 \$50,001 - \$15,000		Current Year Preceding Ye		* This column is for income derived from assets solely held by your spouse or dependent child.	===	Terr assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest , and capital gains, even if reinvested, must be disclosed as	Amount of Income	BLOCK D
								7.	\$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*	5 2			eld by your	ated.	C, you may category of s, interest, closed as		:

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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ontir	ontinuation Sheet (if needed)			INGHICA WOLL	
	BLOCK A	вгоск в	BLOCK C	BLOCK D	CK D
	Asset and/or income Source	Value of Asset	Type of Income	Amount of Income	of Income
SP.		A B C D E F G H I J K L Oo' M		Current Year	Preceding Year
Ë		000 ,000 0,000 00,000	ne(Specif	00 ×	
C		\$1,000 11 - \$15,000 101 - \$50,000 101 - \$100,000 101 - \$250,000 1001 - \$500,000 1001 - \$1,000,000 10,001 - \$5,000,000 10,001 - \$25,000 10,001 - \$50,000 10,001 - \$50,000 10,001 - \$50,000 10,001 - \$50,000	DENDS	\$200 -\$1,000 1 - \$2,500 1 - \$5,000 1 - \$15,000 01 - \$50,000 01 - \$100,000 001 - \$1,000,000 0,001 - \$5,000,000 \$5,000,000	
		\$1,0 \$15, \$50, \$25 \$500 \$1,0 \$25,0 \$25,0	INT CAF EXC TAX	\$1,0 \$2,5 \$5,0 \$15, \$50, \$100 \$1,0 Ove	Non \$1 - \$20 \$1,0 \$2,5 \$5,0 \$15 \$50 \$10 \$1,0
	TRA- Wash, Motual	X	×		
	TRA - CO III (BIA)	X	×		
	C.4 State Bank - account	· ×	×	×	×
		×	*		×
	HOLK-Col. Acorn Z	*	X		
	401K-Dreh Em MA	X			
	20 radio Inc - Speck	X	×	X	
	Alliant Energy - Stock	XX	X	×	×
	(Caro- S	X			*
	NITE Holdings Strock	<i>></i>			
	Modical Device-Coralvill, ta.	X	X ,	X	X
	~ -	X	X		X
	- Lincoln U.S. Growth	X	X		*
	State fension	- \$	*		N
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Centinuation Sheet (if needed) SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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								DC JT SP,		
					•	V	Aeson ADV-Stock	ŧ.	Asset and/or income Source	BLOCK A
						A.C. Sales	X	\$1,001 - \$15,000	Value of Asset	вгоск в
24.00							×	DIVIDENDS INTEREST EXCEPTED/BLIND TRUST Other Type of Income-(Specify: e.g., Partnership Income or Farm Income)	Type of Income	BLOCK C
				_				\$1,001 - \$2,500	Amount	вгос
	Account of the							\$1 - \$200 = \$201 - \$1,000	of Income	BLOCK D
									None	Mone

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SCHEDULE III — LIABILITIES

Name Monica Wilt Vernon

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ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibowed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 ewed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amoun

							Ar	Amount of Liability	of Lia	bility			
ŞŞ.		Date		A	8	C	, m	TI	0	I		r	*
J C	Creditor	Incurred mo/year	Type of Liability	10,001— 15,000	\$15,001— \$50,000 \$50,001 —	\$100,000 \$100,001— \$250,000	3250,000 3250,001 3500,000	5500,001— 61,000,000	1,000,001 5,000,000	55,000,001— 625,000,000	25,000,001— 50,000,000	Over 50,000,000	pouse/DC lability over 1.000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE					-]
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									y.				

SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Position	Name of Organization
City Council Member	City of Celler Rapids, Iours
Officer/Orrector	Vernou Research Group, Inc
Director	City State Bunk, Central City Town

SCHEDULE V — AGREEMENTS

Name Monice Wolf Vernon

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		·		Date	service; continu efit plan mainta	Identify the date
	·			Parties To	service; cominuation or deferral of payments by a former or current employer of the plan maintained by a former employer.	e, parties to, and general terms of any agreement or arrangeme
				Terms of Agreement	service; continuation or deterrat of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address) Example: Doe Jones & Smith, Hometown, Homestate Rackwell Callins, Cedar Rapids, Lown	Accounting services Market Research Services
Rockwell Collins, Cedar Rapids, Lour	Market Research Services
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